## **CHILD'S BIOLOGICAL FAMILY HISTORY**

Name - Caseworker	Name - Agency	Date Completed (mm/dd/yyyy)
List Information Source(s) and Their Relationship to Child		
Maiden Name:	r each family member. Always document maiden names of female family members, if  CHILD  Name: Birthdate: Place of Birth: Native American?	known.
Other Names:  Birthdate: Place of Birth: Date of Death: Place of Death: Native American? Tribes(s) / Clan(s):	Birthdate:   Place of Birth:	
MATERNAL GRANDMOTHER Name: Birthdate: Place of Birth: Date of Death: Place of Death: Native American?  Yes No Unk Tribes(s) / Clan(s):  MATERNAL Name: Birthdate: Place of Birth: Date of Death: Place of Death: Native American?  Yes No Unk Tribes(s) / Clan(s):	Name: Birthdate: Place of Birth: Date of Death: Place of Death: Native American? Name: Birthdate: Date of Death: Native American? Native American?	PATERNAL GRANDFATHER e: date: e of Birth: of Death: e of Death: ve American? Yes  No Unk es(s) / Clan(s):

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MATERNAL GREAT GRANDMOTHER Name:	MATERNAL GREAT GRANDMOTHER Name:	PATERNAL GREAT GRANDMOTHER Name:	PATERNAL GREAT GRANDMOTHER Name:
Native American?	Native American?	Native American?	Native American?
☐ Yes ☐ No ☐ Unk Tribes(s) / Clan(s):	☐ Yes ☐ No ☐ Unk Tribes(s) / Clan(s):	☐ Yes ☐ No ☐ Unk Tribes(s) / Clan(s):	☐ Yes ☐ No ☐ Unk Tribes(s) / Clan(s):
			<u> </u>
MATERNAL GREAT GRANDFATHER Name:	MATERNAL GREAT GRANDFATHER Name:	PATERNAL GREAT GRANDFATHER Name:	PATERNAL GREAT GRANDFATHER Name:
Native American?	Native American?	Native American?	Native American?
☐ Yes ☐ No ☐ Unk Tribes(s) / Clan(s):	☐ Yes ☐ No ☐ Unk Tribes(s) / Clàn(s):	☐ Yes ☐ No ☐ Unk Tribes(s) / Clan(s):	☐ Yes ☐ No ☐ Unk Tribes(s) / Clan(s):